2023 TAX RETURN

	Client Copy
Client:	151045
Prepared for:	BREG FOUNDATION BOZEMAN DUCKIE RACE 389 S. FERGUSON AVE BOZEMAN, MT 59718 (406) 579-0829
Prepared by:	JAKE NEIL Neil and Company, CPAs PC 1184 N 15th Ste 1 Bozeman, MT 59715 406-587-9239
Date:	June 25, 2024
Comments:	
Route to:	

FDIL2001L 05/20/23

2023 Exempt Org. Return prepared for:

BREG FOUNDATION BOZEMAN DUCKIE RACE 389 S. FERGUSON AVE BOZEMAN, MT 59718

Neil and Company, CPAs PC 1184 N 15th Ste 1 Bozeman, MT 59715

Neil and Company, CPAs PC

Bozeman, MT 59715 406-587-9239 Client 151045 June 25, 2024

BREG FOUNDATION BOZEMAN DUCKIE RACE 389 S. FERGUSON AVE BOZEMAN, MT 59718 (406) 579-0829

FEDERAL FORMS

Form 990-PF 2023 Return of Private Foundation

Form 8868 Application for Extension

Form 8879-TE IRS e-file Signature Authorization

FEE SUMMARY

Preparation Fee

Federal Private Foundation Tax Summary BREG FOUNDATION BOZEMAN DUCKIE RACE					
	2022	2022	D:"		
REVENUE PER BOOKS	2023	2022	Diff		
Contributions, gifts, and grants Other income	17,112 7,523	30,195 9,264	-13,083 -1,741		
Total revenue	24,635	39,459	-14,824		
EXPENSES PER BOOKS					
Accounting fees. Other expenses Total operating/administrative exp. Contributions, gifts, grants paid	846 5,144 5,990 16,117	0 7,054 7,054 15,600	846 -1,910 -1,064 517		
Total expenses	22,107	22,654	-547		
Excess of revenue over expenses	2,528	16,805	-14,277		
NET INVESTMENT REVENUE Total revenue	0	0	0		
NET INVESTMENT EXPENSES Total operating/administrative exp	0	0	0		
Total expenses	0	0	0		
Net investment income	0	0	0		
TAX COMPUTATION Tax on investment income	0	0	0		
PAYMENTS AND CREDITS Total payments and credits	0	0	0		
REFUND OR AMOUNT DUE					
Tax dueOverpayment	0	0 0	0		
ADJUSTED NET INCOME REVENUE Total revenue	0	0	0		
ADJUSTED NET INCOME EXPENSES Total operating/administrative exp	0	0	0		
Total expenses	0	0	0		
Adjusted net income	0	0	0		
CHARITABLE PURPOSES DISBURSEMENTS Total operating/administrative exp	0	0	0		
Contributions, gifts, grants paid	16,117	15,600	517		
Total expenses and disbursements	16,117	15,600	517		
NET ASSETS OR FUND BALANCES Net assets/fund bal. at beg. of year Excess of revenue over expenses Net assets/fund bal. at end of year	16,805 2,528 19,333	0 16,805 16,805	16,805 -14,277 2,528		

2	n	2:	3
Z	u	Z:	3

General Information BREG FOUNDATION BOZEMAN DUCKIE RACE

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Forms needed for this return

Federal: 990-PF, 8868

Carryovers to 2024

None

Undistributed Income Carryovers to 2024

2022 Excess Distributions 2023 Excess Distributions

15,600. 16,117.

Preparer e-file Instructions - Federal BREG FOUNDATION BOZEMAN DUCKIE RACE

Page 1

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The organization's Federal tax return is NOT FINISHED until you complete the following instructions.

Prior to transmission of the return

Form 990-PF

The organization should review their Federal Return along with any accompanying schedules and statements.

Paperless e-file

The organization should read, sign and date the Form 8879-TE, IRS e-file Signature Authorization.

Even Return

No payment is required.

After transmission of the return

Receive acknowledgement of your e-file transmission status.

Within several hours, access the program and get your first acknowledgement (ACK) that the program has received your transmission file.

Access the program again after 24 and then 48 hours to receive your Federal ACKs.

Keep a signed copy of Form 8879-TE, IRS e-file Signature Authorization in your files for 3 years.

Do not mail:

Form 8879-TE IRS e-file Signature Authorization

Preparer e-file Instructions - Federal BREG FOUNDATION BOZEMAN DUCKIE RACE

Page 2

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The organization's Federal tax return is NOT FINISHED until you complete the following instructions.

Prior to transmission of the return

Form 8868

No signature is required with Form 8868.

Even Return

No payment is required.

After transmission of the return

Receive acknowledgement of your e-file transmission status.

Within several hours, access the program and get your first acknowledgement (ACK) that the program has received your transmission file.

Access the program again after 24 and then 48 hours to receive your Federal ACKs.

2023

Federal Worksheets BREG FOUNDATION BOZEMAN DUCKIE RACE

Page 1

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Special Events Worksheet

		Less		Less	Net
	Gross	Contri-	Gross	Direct	Income
Special Event	Receipts	<u>butions</u>	Revenue	Expenses	or Loss
DUCKIE RĀCE AND RAFFLE	\$ 7,523.	\$ 0.	\$ 7,523.	\$ 4,567.	\$ 2,956.
Subtotal	\$ 7,523.	\$ 0.	\$ 7,523.	\$ 4,567.	\$ 2,956.
*Subtotal	\$ 0.	\$ 0.	\$ 0.	\$ 0.	\$ 0.
Total	\$ 7,523.	\$ 0.	\$ 7,523.	\$ 4,567.	\$ 2,956.

^{*}Events combined on the return as the third event.

Form **8879-TE**

IRS E-file Signature Authorization for a Tax Exempt Entity

For calendar year 2023, or fiscal year beginning ______ , 2023, and ending ______ , 20 _____ Do not send to the IRS. Keep for your records. Go to www.irs.gov/Form8879TE for the latest information.

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Name of filer BREG FOUNDATION BOZEMAN DUCKIE RACE Name and title of officer or person subject to tax

EIN or SSN

88-1524136

ANDREW HURLI	BURT Presid	ent			
Part I Type	e of Return an	d Return Information			
Check the box for the and Form 5330 file 6a, 7a, 8a, 9a, or 1 6b, 7b, 8b, 9b, or 1	ne return for which ers may enter dol 0a below, and the 10b, whichever is	you are using this Form 8879-TE an lars and cents. For all other forms amount on that line for the retur applicable, blank (do not enter -0 han one line in Part I.	s, enter whole dollars only. If yn being filed with this form wa	ou check the box on li s blank, then leave lin	ine 1a, 2a, 3a, 4a, 5a, ne 1b, 2b, 3b, 4b, 5b,
1a Form 990 che	eck here	b Total revenue, if any (Form	990, Part VIII, column (A), line	12) 1b	
2a Form 990-EZ	check here	b Total revenue, if any (Form			
3a Form 1120-P	OL check here	b Total tax (Form 1120-POL, li	ne 22)	3b	
4a Form 990-PF	check here	X b Tax based on investment in	come (Form 990-PF, Part V, Ii	ne 5) 4b	0.
5a Form 8868 cl	heck here	b Balance due (Form 8868, lin			
6a Form 990-T	check here	b Total tax (Form 990-T, Part	II, line 4)	6b	
7a Form 4720 cl	heck here	b Total tax (Form 4720, Part II	I, line 1)	7b	
8a Form 5227 cl	heck here	b FMV of assets at end of tax	year (Form 5227, Item D)	8b	
9a Form 5330 cl	heck here	b Tax due (Form 5330, Part II,	line 19)	9b	
10a Form 8038-C	P check here.	b Amount of credit payment re	equested (Form 8038-CP, Par	III, line 22) 10b	
Part II Declar	ation and Sign	nature Authorization of Off	icer or Person Subject t	о Тах	
Under penalties of p (name of entity)			bove entity or I am a pe		h respect to
IRS and to receive processing the return initiate an electronic of the federal taxes U.S. Treasury Fina financial institution inquiries and resolution	from the IRS (a) n or refund, and (c) funds withdrawal s owed on this refuncial Agent at 1-8 involved in the ve issues related	my intermediate service provider, an acknowledgement of receipt o) the date of any refund. If applicable (direct debit) entry to the financial inturn, and the financial institution t 388-353-4537 no later than 2 busi processing of the electronic paym to the payment. I have selected at to electronic funds withdrawal.	r reason for rejection of the tra e, I authorize the U.S. Treasury a stitution account indicated in the o debit the entry to this accouness days prior to the paymer tent of taxes to receive confide	ansmission, (b) the real and its designated Finantax preparation softwarent. To revoke a payment (settlement) date. If a central information necessity	ason for any delay in nicial Agent to re for payment ent, I must contact the also authorize the essary to answer
PIN: check one bo	x only				_
X I authorize 1	Neil and Cor		to enter my PIN	15104	as my signature
		ERO firm name		Enter five numbers, but do not enter all zeros	
agency(ies) re return's discl	egulating charities a osure consent sc	cally filed return. If I have indicate as part of the IRS Fed/State progran reen.	n, I also authorize the aforement	y of the return is being oned ERO to enter my i	PIN on the
return. If I hav	e indicated within	this return that a copy of the return is lenter my PIN on the return's disclo	s being filed with a state agency	(ies) regulating charities	s as part of
Signature of officer or pe	rson subject to tax			Date	
Part III Cert	ification and A	Authentication			
		t electronic filing identification e-digit self-selected PIN.		259715 ter all zeros	
	this return in acco	ry is my PIN, which is my signature ordance with the requirements of I			
ERO's signature	JAKE NEIL		Date		

ERO Must Retain This Form — See Instructions Do Not Submit This Form to the IRS Unless Requested To Do So

Form **8868**

(Rev. January 2024)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return or Excise Taxes Related to Employee Benefit Plans

File a separate application for each return. Go to www.irs.gov/Form8868 for the latest information.

OMB No. 1545-0047

Electronic filing (e-file). You can electronically file Form 8868 to request up to a 6-month extension of time to file any of the forms listed below except for Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts. An extension request for Form 8870 must be sent to the IRS in a paper format (see instructions). For more details on the electronic filing of Form 8868, visit www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits.

Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-TE and Form 8879-TE for payment instructions

for pag	ment instructions.					
All cor use Fo	porations required to file an income tax return or 7004 to request an extension of time to file	other than Form 990 income tax returns	D-T (including 1120-C filers), partnership	os, REI	VICs, and t	trusts must
Part I	- Identification					
	Name of exempt organization, employer, or other filer	r, see instructions.		Taxpay	er identification	n number (TIN)
Type o	BREG FOUNDATION					
Print	BOZEMAN DUCKIE RACE			88-3	1524136	
File by t		oox, see instructions.				
	due date for illing your 389 S. FERGUSON AVE					
return. S	return. See City, town or post office, state, and ZIP code. For a foreign address, see instructions.					
II ISU UCU	BOZEMAN, MT 59718					
Enter	the Return Code for the return that this applicat	ion is for (file a sep	parate application for each return)			04
App	ication Is For	Return Code	Application Is For			Return Code
Form	n 990 or Form 990-EZ	01	Form 4720 (other than individual)			09
Form	4720 (individual)	03	Form 5227			10
Form	1 990-PF	04	Form 6069			11
Form	n 990-T (section 401(a) or 408(a) trust)	05	Form 8870			12
	1 990-T (trust other than above)	06	Form 5330 (individual)			13
Form	n 990-T (corporation)	07	Form 5330 (other than individual)			14
Form	1 1041-A	08	,			
• If t	ne to file Form 5330. his application is for an extension of time to file Plan Name Plan Number Plan Year Ending (MM/DD/YYYY) I — Automatic Extension of Time To F	· — — — — — — — — — — — — — — — — — — —				
Te If the	e books are in the care of ANDREW HURLBURN lephone No. (406) 579-0829 the organization does not have an office or place of this is for a Group Return, enter the organization eck this box	Fax No. e of business in the his four-digit Group group, check this be ne until 11/15	e United States, check this box Exemption Number (GEN) If ox and attach a list with the na, 20 24 _, to file the exempt organ	this is mes ar	for the wh	ole group, all members
3a <u> </u>	acalendar year 20 23 or tax year beginning, 20 tax year beginning, 20 fthe tax year entered in line 1 is for less than 1 Change in accounting period fthis application is for Forms 990-PF, 990-T, 47 nonrefundable credits. See instructions	720, or 6069, enter	the tentative tax, less any any refundable credits and estimated	3a	\$	0.
c I	Balance due. Subtract line 3b from line 3a. Inclu EFTPS (Electronic Federal Tax Payment System	ıde your payment v	vith this form, if required, by using	3c		0.

Form 990-PF

Department of the Treasury Internal Revenue Service

Return of Private Foundation or Section 4947(a)(1) Trust Treated as Private Foundation

OMB No. 1545-0047

Do not enter social security numbers on this form as it may be made public. Go to www.irs.gov/Form990PF for instructions and the latest information.

2023
Open to Public Inspection

For calendar year 2023 or tax year beginning ,20 2023, and ending Employer identification number 88-1524136 BREG FOUNDATION BOZEMAN DUCKIE RACE В Telephone number (see instructions) (406) 579-0829 389 S. FERGUSON AVE BOZEMAN, MT 59718 If exemption application is pending, check here . . . G Check all that apply: Initial return Initial return of a former public charity **D** 1 Foreign organizations, check here..... Final return Amended return 2 Foreign organizations meeting the 85% test, Address change Name change check here and attach computation. X Section 501(c)(3) exempt private foundation Check type of organization: Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation If private foundation status was terminated under Fair market value of all assets at end of year Accounting method: X Cash Accrual (from Part II, column (c), line 16) Other (specify) If the foundation is in a 60-month termination \$ (Part I, column (d), must be on cash basis.) under section 507(b)(1)(B), check here . . Part I Analysis of Revenue and (d) Disbursements (c) Adjusted net Expenses (The total of amounts in (a) Revenue and (b) Net investment for charitable expenses per books income ińcome columns (b), (c), and (d) may not purposes necessarily equal the amounts in (cash basis only) column (a) (see instructions).) Contributions, gifts, grants, etc., received (attach schedule). . 17,112 2 Check X if the foundation is **not** required to attach Sch. B 3 Interest on savings and temporary cash investments. Dividends and interest from securities. **5a** Gross rents...... Net rental income or (loss) **6a** Net gain or (loss) from sale of assets not on line 10. Gross sales price for all assets on line 6a Capital gain net income (from Part IV, line 2) . . . Income modifications . . . Gross sales less returns and allowances . Less: Cost of C Gross profit or (loss) (attach schedule). 11 Other income (attach schedule) See Statement 1 7,523 12 0 0 Total. Add lines 1 through 11. . . 13 Compensation of officers, directors, trustees, etc. 14 Other employee salaries and wages..... perating and Administrative Expenses 15 Pension plans, employee benefits 16a Legal fees (attach schedule) . . . **b** Accounting fees (attach sch) . . . See . St. . 2 846 C Other professional fees (attach sch). 18 Taxes (attach schedule)(see instrs). 19 Depreciation (attach schedule) and depletion 21 Travel, conferences, and meetings..... 22 23 Other expenses (attach schedule). See Statement 3 5,144. Total operating and administrative expenses. Add lines 13 through 23......
Contributions, gifts, grants paid.....Part XIV 5,990 16,117 16,117 Total expenses and disbursements. Add lines 24 and 25 22,107 0. 16,117. 27 Subtract line 26 from line 12: Excess of revenue over expenses 2,528. **b** Net investment income (if negative, enter -0-). . . 0. C Adjusted net income (if negative, enter -0-). 0.

TEFA0301I 08/25/23

Dar	+ II	Balance Sheets	Attached schedules and amounts in the description	Beginning of year	End o	f year
гаг			column should be for end-of-year amounts only. (See instructions.)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest	-bearing	16,805.	19,333.	
	2	Savings and tempor	ary cash investments			
	3	Accounts receivable				
		Less: allowance for	doubtful accounts			
	4	Pledges receivable				
		Less: allowance for				
	5	Grants receivable				
	6	Receivables due from officiel disqualified persons (atta	cers, directors, trustees, and other ch schedule) (see instructions)			
	7	Other notes and loans rec	eivable (attach sch)			
		Less: allowance for				
	8	Inventories for sale	or use			
	9	Prepaid expenses a	nd deferred charges			
Assets	10a	Investments – U.S. obligations (attach s	and state government chedule)			
SS	b	Investments — corporate	stock (attach schedule)			
⋖	С	Investments — corporate	bonds (attach schedule)			
	11	Investments – land, equipment: basis	buildings, and			
		Less: accumulated deprec (attach schedule)	iation			
	12		gage loans			
	13		r (attach schedule)			
	14	Land, buildings, and	l equipment: basis			
		Less: accumulated deprec (attach schedule)	iation			
	15 16	Other assets (descri	completed by all filers -			
		see the instructions.	Also, see page 1, item l)	16,805.	19,333.	0.
	17	Accounts payable ar	nd accrued expenses			
	18					
8	19					
Liabilities	20		ors,trustees, and other disqualified persons			
\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	21		s payable (attach schedule)			
Ï	22	Other liabilities (des	cribe)			
	23	Total liabilities (add	lines 17 through 22)	0.	0.	
			ow FASB ASC 958, check here and			
8			25, 29, and 30			
anc	24	Net assets without of	lonor restrictions			
i Ba	25		or restrictions			
Vet Assets or Fund Balances			not follow FASB ASC 958, check here 26 through 30.			
౼	26	Capital stock, trust p	orincipal, or current funds			
N	27	Paid-in or capital surplus	, or land, bldg., and equipment fund			
Se	28	Retained earnings, accum	ulated income, endowment, or other funds	16,805.	19,333.	
AS	29	Total net assets or f	fund balances (see instructions)	16,805.	19,333.	
ĘĘ (30		net assets/fund balances	16,805.	19,333.	
	t III		ges in Net Assets or Fund Balance		2370001	
		-	alances at beginning of year – Part II, colu		aree with	
'	end-	of-year figure reporte	d on prior year's return)	(a), iiio 25 (iiiast a	1	16,805.
2	Ente	r amount from Part I,	line 27a		2	2,528.
3	Other	increases not included in li	ne 2 (itemize)		3	·
4	Add	lines 1, 2, and 3				19,333.
5	Decrea	ases not included in line 2 ((itemize)		5	
6	Total	net assets or fund b	alances at end of year (line 4 minus line 5)	- Part II, column (b), I	ine 29 6	19,333.

Table 1		the kind(s) of property sold (for example)		(b) How acquire		(d) Date sold
c c d d (c) Cross sales price (d) Depreciation allowed (or allowable) (d) Cost or other basis plus expense of sale (e) plus (f) mrus (g)) a b (c) Gross sales price (d) Depreciation allowed (or allowable) (plus expense of sale (e) plus (f) mrus (g)) c Complete only for assets showing gain in column (ft) and owned by the foundation on 12/31/69. (b) Excess of col. (ft) (c) plus (ft) mrus (d) (d) plus expense of sale (e) plus (ft) mrus (d)) c Complete only for assets showing gain in column (ft) and owned by the foundation on 12/31/69. (g) FMV as of 12/31/69 (g) Adjusted basis (h) Excess of col. (ft) (d) plus mrus col. (ft) hard test (ft) as of 12/31/69 (g) and ft) (ft) and test (ft) as of 12/31/69 (g) and ft) (ft) as of 12/31/69 (g) and ft) (ft) as of 12/31/69 (g) and ft) (ft) (ft) (ft) (ft) (ft) (ft) (ft)				P — Purchase D — Donation		(mo., day, yr.)
c (e) Gross sales price (f) Depreciation allowed (or allowable) (g) Cost or other basis plus expense of sale (h) Gain or (loss) (e) plus (f) minus (g)) a	1a N/A					
e) Gross sales price (f) Depreciation allowed (g) Cost or other basis plus expense of sale (h) Gain or (loss) (e) plus (f) minus (g)) a b c Complete only for assets showing gain in column (f) and owned by the foundation on 12/31/69. (f) FMV as of 12/31/69 (g) Adjusted basis (g) Excess of col. (g) (g) minus col. (h), but not less as of 12/31/69 (g) Adjusted basis (e) (e) column (f) and owned by the foundation on 12/31/69. (g) FMV as of 12/31/69 (g) Adjusted basis (g) Excess of col. (g) (g) ani minus col. (h), but not less as of 12/31/69 (e) column (f) and owned by the foundation on 12/31/69. (g) Excess of col. (g) (g) ani minus col. (h), but not less than (e) or Losses (from col. (h)) ani minus col. (h), but not less (from col. (h)) and the column (f) and owner or (figure or less) as defined in sections 12/22(5) and (g): If gain, also enter in Part I, line 8, column (c). See instructions, if (loss), enter -0. If gain, also enter in Part I, line 8, column (c). See instructions, if (loss), enter -0. If Exempt operating foundations described in section 4940(a), 4940(b), 4940(b), or 4948 – see instructions) Ia Exempt operating foundations enter 1.39% (0.0139) of line 27b. Exempt foreign organizations, enter defoundations only; others, enter -0.) 3 Add lines 1 and 2. 4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0.) 5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0. 5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0. 6 Credits/Payments: 7 Total credits and payments. Add lines 6a through 6d. 8 Enter any penalty for underpayment or extension of time to file (Form 8888). 6 Enter any penalty for underpayment or extension of time to file (Form 8888). 8 Enter any penalty for underpayment or extension of time to file (Form 8888). 9 Total use if the total of lines 5 and 8 is now than line 7, enter amount overlaid. 10 Overpayment, if it per 7 is more than the total	b					
e (e) Gross sales price (f) Depreciation allowed (g) Cost or other basis (h) Gain or (loss) (e) plus (h minus (g)) a	С					
(e) Gross sales price (f) Depreciation allowed (g) Cost or other basis plus expense of sale (e) plus (f) minus (g)) a b c d d e Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69. (f) FMV as of 12/31/69 (g) Adjusted basis as of 12/31/69 (g) Excess of col. (h) gain minus col. (k), but not less than -0-) or Lasses (from col. (h)) a b c d d d e 2 Capital gain net income or (net capital loss). [If gain, also enter in Part I, line 7] (g)	d					
a b Complete only for assets showing gain in column (t) and owned by the foundation on 12/31/69. (b) Excess of col. (i) over col. (i), if any a (b) Excess of col. (i) over col. (i), if any a (c) Excess of col. (i) over col. (ii), if any a (d) Excess of col. (i) over col. (ii), if any a (e) Excess of col. (i) over col. (ii), if any a (f) Excess of col. (i) over col. (ii), if any a (h) Excess of col. (i) over col. (ii), if any a (e) Excess of col. (i) over col. (ii), if any a (f) Excess of col. (i) over col. (ii), if any a (h) Excess of col. (i) over col. (ii), if any a (h) Excess of col. (i) over col. (ii), if any a (h) Excess of col. (i) over col. (ii), if any a (h) Excess of col. (i) over col. (ii), if any a (h) Excess of col. (i) over col. (ii), if any a (h) Excess of col. (i) over col. (ii) over col. (ii), if any a (ii) Gains (Col. (th) gain minus col. (ii), but not less than -0-) or Losses (from col. (iii) over col. (iii) over col. (iii) over col. (iii) a (iii) Gains (Col. (th) gain minus col. (iii) over	е					
b c Complete only for assets showing gain in column (it) and owned by the foundation on 12/31/69. (i) FMV as of 12/31/69	(e) Gross sales price					
Complete only for assets showing gain in column (ft) and owned by the foundation on 12/31/69. (i) FMV as of 12/31/69 (ii) Adjusted basis over coi. (ii) fany or Losses (from col. (iii) but not less than -0.) or Losses (from col. (iii) but not less than -0. or Losses (from col. (iii) but not less than -0. or Losses (from col. (iii) but not les t	a					
de Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69. (j) FMV as of 12/31/69 (j) Adjusted basis as of 12/31/69 (k) Excess of col. (i) gain minus col. (k), but not less than -0-) or Losses (from col. (h), but not less than -0-) or Losses (from col. (h), but not less than -0-) or Losses (from col. (h), but not less than -0-) or Losses (from col. (h)) but not less than -0-) or Losses (from col. (h), but not less than -0-) or Losses (from col. (h)) but not less than Losses than Losses (from col. (h)) but not less than Losses than Losses than Losses than Losses than Losses than	b					
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69. (i) FMV as of 12/31/69 (ii) FMV as of 12/31/69 (iv) Excess of col. (i) gain minus col. (iv), but not less than -0-) or Losses (from col. (h)) a b c d e 2 Capital gain net income or (net capital loss)	С					
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69. (i) FMV as of 12/31/69 (ii) Adjusted basis (iv) Excess of col. (i) over col. (i), if any (iii) as of 12/31/69 (iv) Excess of col. (iv) over col. (iv), if any (iv) Excess of col. (iv) over col. (iv), if any (iv) Excess of col. (iv) over col. (iv), if any (iv) Excess of col. (iv) over col. (iv), if any (iv) Excess of col. (iv) over col. (iv), if any (iv) Excess of col. (iv) over col. (iv), if any (iv) Excess of col. (iv) over col. (iv), if any (iv) Excess of col. (iv) over col. (iv), if any (iv) Excess of col. (iv) over col. (i	d					
(i) FMV as of 12/31/69 (ii) Adjusted basis as of 12/31/69 (iv) Excess of col. (i) over col. (i), ind not less than -0-) or Losses (from col. (iii)) a mount of line in the section of 12/31/69 (iii) over col. (iii), if any and minus col. (iii), but not less than -0-) or Losses (from col. (iii)) and in the section of 12/31/69 (iiii) over col. (iii), if any and in the section of 12/31/69 (iiii) over col. (iii), if any and in the section of 12/31/69 (iiii) over col. (iii), if any and in the section of 12/31/69 (iiii) over col. (iiii), if any and in the section of 12/31/69 (iiii) over col. (iiii), if any and in the section of 12/31/69 (iiii) over col. (iiii), if any and in the section of 12/31/69 (iiiii) over col. (iiii), if any and in the section of 12/31/69 (iiiiii) over col. (iiiiii), if any and in the section of 12/31/69 (iiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiii	е					
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b c d d d d d d d d d d d d d d d d d d	(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of colover col. (j), if a	. (i) any	gain minus col. (k), b	ut not less
c d d	а					
d e 2 Capital gain net income or (net capital loss) [If gain, also enter in Part I, line 7] 2 [If gain, also enter in Part I, line 7] 3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8 Part V [Excise Tax Based on Investment Income (Section 4940(b), enter -0-] 3 a late that line 8 Part V [Excise Tax Based on Investment Income (Section 4940(b), or 4948 – see instructions) 1a Exempt operating foundations described in section 4940(d)(2), check here [and enter *\N/A* on line 1.] Date of ruling or determination letter: (attach copy of letter if necessary – see instructions) b All other domestic foundations enter 1.39% (0.0139) of line 27b. Exempt foreign organizations, enter 4% (0.04) of Part I, line 12, col. (b). 2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-). 4	b					
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2 Capital gain net income or (net capital loss) If gain, also enter in Part I, line 7 3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c). See instructions. If (loss), enter -0- in Part I, line 8 Part V Excise Tax Based on Investment Income (Section 4940(a), 4940(b), or 4948 – see instructions) 1a Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1. Date of ruling or determination letter: (attach copy of letter if necessary – see instructions) b All other domestic foundations enter 1.39% (0.0139) of line 27b. Exempt foreign organizations, enter 4% (0.04) of Part I, line 12, col. (b). 2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-). 2 0 3 Add lines 1 and 2. 3 0 4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-). 4 0 5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0 5 0 6 Credits/Payments: a 2023 estimated tax pymts and 2022 overpayment credited to 2023. 6a	d					
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Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0						0.
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10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid. 10 11 Enter the amount of line 10 to be: Credited to 2024 estimated tax Refunded. 11			<u> </u>			
11 Enter the amount of line 10 to be: Credited to 2024 estimated tax Refunded						0.
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Part VI-A Statements Regarding Activities

1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		Yes	No
	participate or intervene in any political campaign?	1a		Χ
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition	1b		Х
	If the answer is "Yes" to 1a or 1b , attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.			
c	Did the foundation file Form 1120-POL for this year?	1c		Χ
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:			
	(1) On the foundation. \$ 0 (2) On foundation managers. \$ 0. Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on			
•	foundation managers. \$			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		Х
_	If "Yes," attach a detailed description of the activities.	_		- 71
_				
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If 'Yes,' attach a conformed copy of the changes	3		Х
Δa	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		X
	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		Λ
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		Х
•	If "Yes," attach the statement required by <i>General Instruction T</i> .	j		Λ
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:			
·	By language in the governing instrument, or			
	• By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	6		Х
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XIV	7	Х	21
8a	Enter the states to which the foundation reports or with which it is registered. See instructions.	-	71	
	N/A			
h	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General			
L.	(or designate) of each state as required by <i>General Instruction G?</i> If "No," attach explanation	8b	Х	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5)			
3	for calendar year 2023 or the tax year beginning in 2023? See the instructions for Part XIII. If "Yes," complete Part XIII.	9		X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names			
10	and addresses.	10		Χ
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions	11		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had	10		
12	advisory privileges? If "Yes," attach statement. See instructions	12	3.7	X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address	13	Χ	<u> </u>
1/		E 7 0		
14	The books are in care of ANDREW HURLBURT Telephone no. (406) Located at 389 S. FERGUSON MT BOZEMAN MT ZIP + 4 59718	<u> 519</u>	_082	<u> </u>
15	Located at 389 S. FERGUSON MT BOZEMAN MT ZIP + 4 59718 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 — check here	N/A		
13	and enter the amount of tax-exempt interest received or accrued during the year	. 4 - / . 4 3	٠.	∐ N/A
			Yes	No No
16	At any time during calendar year 2023, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country?	16		X
				Λ
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country			
BAA	ů ,	rm 99 ()-PF (2	2023)

Par	t VI-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year, did the foundation (either directly or indirectly):			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	1a (1)		Χ
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?	1a (2)		Х
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	1a (3)		Χ
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	1a (4)		Х
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?	1a (5)		X
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.)	1a (6)		X
	If any answer is "Yes" to 1a(1)—(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions.	1b		
С	Organizations relying on a current notice regarding disaster assistance, check here			
d	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2023?	1d		Х
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):			
а	At the end of tax year 2023, did the foundation have any undistributed income (Part XII, lines 6d and 6e) for tax year(s) beginning before 2023? If "Yes," list the years	2a		Х
	20 , 20 , 20 , 20			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement — see instructions.)	2b		
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.	20		
ŭ	20, 20, 20			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business			
-	enterprise at any time during the year?	3a		Χ
b	olf "Yes," did it have excess business holdings in 2023 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Form 4720, Schedule C, to determine if the foundation had excess business holdings in 2023.)			
		3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		Х
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of			
BAA	the tax year beginning in 2023?	4b rm 99		30337 X
	F	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	υ-ı Γ (<u></u>

Part VI-B Statements Regarding Activit	ies for Which Form	4720 May Be Req	uired (continued)	1100		- 3
5a During the year, did the foundation pay or incur a	,				Yes	No
(1) Carry on propaganda, or otherwise attempt	ot to influence legislatio	n (section 4945(e))?		5a(1)		Χ
(2) Influence the outcome of any specific pub on, directly or indirectly, any voter registra	lic election (see section	4955); or to carry		5a(2)		Х
(3) Provide a grant to an individual for travel,	study, or other similar	purposes?		5a(3)		Χ
(4) Provide a grant to an organization other than in section 4945(d)(4)(A)? See instructions	a charitable, etc., organi	zation described		5a(4)		Х
(5) Provide for any purpose other than religio educational purposes, or for the prevention	us, charitable, scientific	. literary. or		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		
	-			34(3)		Х
b If any answer is "Yes" to 5a(1)—(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance? See instructions N/A						
c Organizations relying on a current notice rega						
d If the answer is "Yes" to question 5a(4), does the tax because it maintained expenditure respon If "Yes," attach the statement required by Reg	sibility for the grant?		N,	/A 5d		
		• •	_			
6a Did the foundation, during the year, receive as on a personal benefit contract?	ny funds, directly or indi	irectly, to pay premiums	S 	6a		Χ
b Did the foundation, during the year, pay prem If "Yes" to 6b, file Form 8870.	iums, directly or indirec	tly, on a personal bene	fit contract?	6b		X
7a At any time during the tax year, was the found	. , .					Χ
b If "Yes," did the foundation receive any proced	-			/ <u>A</u> . 7b		
8 Is the foundation subject to the section 4960 tax or excess parachute payment(s) during the ye				8		Χ
Part VII Information About Officers, D and Contractors	irectors, Trustees,	Foundation Manag	gers, Highly Paid E	mployee	s,	
1 List all officers, directors, trustees, and found	dation managers and th	neir compensation. See	instructions.			
(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense other a		
ANDREW J HURLBURT	President	0.	0.			0.
389 S. FERGUSON AVE	0					
BOZEMAN, MT 59718	Wise Describes	0	0			^
LINDSEY A HURLBURT 389 S. FERGUSON AVE	Vice Presiden 0	0.	0.			0.
BOZEMAN, MT 59718	O					
MARIE A SCHENCK	Sec/Treasurer	0.	0.			0.
389 S. FERGUSON AVE BOZEMAN, MT 59718	0					
2022221, 112 00:10						
2 Compensation of five highest-paid employees (o		on line 1 – see instruction	ns). If none, enter "NONE. (d)Contributions to			
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d)Contributions to employee benefit plans and deferred compensation	(e) Expense other a		
None						
						
Total number of other employees paid over \$50,000 BAA)	3/25/23		Form 990	- PF (2	<u>0</u> 023)
					•	•

Form 990-PF (2023) BREG FOUNDATION	88-1524	4136 Page 7
Part VII Information About Officers, Directors, Trustees, Foundation Maand Contractors (continued)	anagers, Highly Paid Er	nployees,
3 Five highest-paid independent contractors for professional services. See instructions	If none enter "NONF "	
	Type of service	(c) Compensation
None	, 31	<u> </u>
		_
Total number of others receiving over \$50,000 for professional services		0
Part VIII-A Summary of Direct Charitable Activities	<u> </u>	<u>_</u>
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information organizations and other beneficiaries served, conferences convened, research papers produced, etc.	such as the number of	Expenses
1 N/A		
2		
3		
4		
[*]		
Part VIII-B Summary of Program-Related Investments (see instructions)	<u> </u>	
Describe the two largest program-related investments made by the foundation during the tax year or 1 N/A	l lines I and 2.	Amount
1 <u>N/A</u>		
2		
All other program-related investments. See instructions.		
3		
Total Add lines 1 through 3		
Total. Add lines 1 through 3		0. Form 990-PF (2023)

Par	Minimum Investment Return (All domestic foundations must complete this part. For see instructions.)	reign f	oundations,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
	Average monthly fair market value of securities.	1a	
	Average of monthly cash balances.	1b	
	Fair market value of all other assets (see instructions)	1c 1d	^
	Total (add lines 1a, b, and c)	10	0.
-	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets.	2	
3	Subtract line 2 from line 1d.	3	
3		3	
4	Cash deemed held for charitable activities. Enter 1.5% (0.015) of line 3 (for greater amount, see instructions)	4	
5	Net value of noncharitable-use assets. Subtract line 4 from line 3	5	0.
6	Minimum investment return. Enter 5% (0.05) of line 5	6	0.
Par		ting fo	undations
	and certain foreign organizations, check here and do not complete this part.)		
	Minimum investment return from Part IX, line 6.	1	
	Tax on investment income for 2022 from Part V, line 5		
	Income tax for 2022. (This does not include the tax from Part V.)		
С	Add lines 2a and 2b.	2c	
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4.	5	
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XII, line 1	7	0.
Par	Qualifying Distributions (see instructions)		
	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:	1-	16 115
	Expenses, contributions, gifts, etc. — total from Part I, column (d), line 26	1a 1b	16,117.
	S Company of the comp		
	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
а	Amounts set aside for specific charitable projects that satisfy the: Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part XII, line 4	4	16,117.
BAA			Form 990-PF (2023)

Part XII Undistributed Income (see instructions)

		(a) Corpus	(b) Years prior to 2022	(c) 2022	(d) 2023
1	Distributable amount for 2023 from Part X,				
2	Undistributed income, if any, as of the end of 2023:				0.
	Enter amount for 2022 only			0.	
b	Total for prior years: 20, 20, 20		0.		
3	Excess distributions carryover, if any, to 2023:				
	From 2018				
	From 2019				
	From 2020				
	From 2021				
	From 2022 15,600.				
	Total of lines 3a through e	15,600.			
4	Qualifying distributions for 2023 from Part XI,				
_	line 4: \$ 16,117.				
а	Applied to 2022, but not more than line 2a			0.	
b	Applied to undistributed income of prior years (Election required — see instructions)		0.		
С	Treated as distributions out of corpus (Election required – see instructions)	0.			
d	Applied to 2023 distributable amount				0.
е	Remaining amount distributed out of corpus.	16,117.			
5	Excess distributions carryover applied to 2023 (If an amount appears in column (d), the same amount must be shown in column (a).)	0.			0.
6	Enter the net total of each column as indicated below:	0.			0.
а	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	31,717.			
	Prior years' undistributed income. Subtract line 4b from line 2b	01/11/	0.		
С	Enter the amount of prior years' undistributed		0.		
	income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
Ч	Subtract line 6c from line 6b. Taxable		• • • • • • • • • • • • • • • • • • • •		
ŭ	amount — see instructions		0.		
е	Undistributed income for 2022. Subtract line 4a from line 2a. Taxable amount — see instructions			0.	
f	Undistributed income for 2023. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2024.				0.
7	Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required — see instructions)	0.			
8	Excess distributions carryover from 2018 not applied on line 5 or line 7 (see instructions).	0.			
9	Excess distributions carryover to 2024. Subtract lines 7 and 8 from line 6a	31,717.			
10	Analysis of line 9:	01, 111			
	Excess from 2019				
b	Excess from 2020				
С	Excess from 2021				
d	Excess from 2022 15,600.				
е	Excess from 2023 16,117.				
BAA					Form 990-PF (2023)

Par	t XIII	Private Operating Foundat	t ions (see instru	ictions and Par	t VI-A, question	9)	N/A
1a	If the for	undation has received a ruling or deterive for 2023, enter the date of the	ermination letter that	it is a private operat	ting foundation, and th	e ruling	
b		pox to indicate whether the foundate	3			4942(j)(3) or	4942(j)(5)
2a	Enter th	ne lesser of the adjusted net from Part I or the minimum	Tax year		Prior 3 years		(e) Total
	investme	ent return from Part IX for	(a) 2023	(b) 2022	(c) 2021	(d) 2020	
h	,	ar listed					
	Qualifyi	ng distributions from Part XI,					
d	Amounts	or each year listedincluded in line 2c not used directly					
е	Qualifyi	conduct of exempt activities					
,	Subtrac	t line 2d from line 2c					
3		te 3a, b, or c for the ive test relied upon:					
а		" alternative test — enter:					
	` '	ue of all assetsue of assets qualifying under					
	sec	tion 4942(j)(3)(B)(i)					
b	minimum	ent" alternative test — enter 2/3 of investment return shown in Part IX, each year listed					
С		rt" alternative test — enter:					
	inve divi on	al support other than gross estment income (interest, dends, rents, payments securities loans (section (a)(5)), or royalties)					
	more	oort from general public and 5 or e exempt organizations as provided ection 4942(j)(3)(B)(iii)					
	(3) Lar	gest amount of support from exempt organization					
		ss investment income					
		Supplementary Information assets at any time during th	e year — see in	part only if the structions.)	foundation had	\$5,000 or more	in
		tion Regarding Foundation Managemanagers of the foundation who have		nan 2% of the total o	contributions received l	by the foundation hef	ore the
<u> </u>	close of	any tax year (but only if they have	e contributed more	than \$5,000). (See	section 507(d)(2).)	by the foundation ben	ore the
	None						
b	List any	managers of the foundation who own	10% or more of the	stock of a corporation	on (or an equally large	portion of the owner	ship of
	None	ership or other entity) of which the	foundation has a 1	0% or greater inter	est.		
2	Informa	tion Regarding Contribution, Grant,	Gift, Loan, Scholarsh	nip, etc., Programs:			
		s for funds. If the foundation make					
а		, and d. See instructions. ne, address, and telephone number o	r email address of th	e person to whom a	pplications should be a	addressed:	
b	The for	n in which applications should be	submitted and infor	mation and materia	als they should inclu	de:	
С	Any sub	omission deadlines:					
d	Any res	trictions or limitations on awards,	such as by geograp	hical areas, charita	able fields, kinds of i	nstitutions, or other	factors:

Form 990-PF (2023) BREG FOUNDATION

Part XIV Supplementary Information (continued)

Recipient	Recipient If recipient is an individual, show any relationship to any foundation manager or substantial contributor		Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	Contribution	
a Paid during the year WARRIORS AND QUIET WATERS 351 EVERGREEN DR STA a BOZEMAN MT 59715	NONE	PC	CHARITABLE	15,117.
BOLLIAM III 03/10				
AVA JAMISON 1229 HUNTERS WAY BOZEMAN MT 59718	NONE	I	SCHOLORSHIP	1,000.
Total				16,117.
b Approved for future payment				- ,
Total				

Par	t XV-A	\ Ana	lysis of Income-Producing I	Activities				
Ente	r gross a	amounts	unless otherwise indicated.	Unrelate	d business income	Excluded	l by section 512, 513, or 514	(e)
	_			(a) Business code	(b) Amount	(c) Exclu- sion	(d) Amount	Related or exempt function income (See instructions.)
1	Progran	m service	e revenue:			code		
а								
b								
С	·							
d								
е								
f								
a	Fees ar	nd contra	acts from government agencies					
2			es and assessments					
3		•	and temporary cash investments					
4			nterest from securities					
5			me or (loss) from real estate:					
			property					
			ed property					
_								
6			r (loss) from personal property					
7			nt income					
8			sales of assets other than inventory			_		
9			(loss) from special events					2,956.
10	Gross p	profit or ((loss) from sales of inventory					
11	Other rev	venue: a						
		b						
		С						
		d						
		е						
12	Subtota	al. Add c	olumns (b), (d), and (e)					2 956
			olumns (b), (d), and (e)				13	2,956.
13	Total. A	Add line	12, columns (b), (d), and (e)				13	
13 (See	Total. A workshe	Add line eet in lin	12, columns (b), (d), and (e) e 13 instructions to verify calculation	ons.)				
13 (See Par	Total. A workshe	Add line eet in lin	12, columns (b), (d), and (e)e 13 instructions to verify calculations to the ationship of Activities to the	ons.) Accompli	shment of Exemp	ot Purpe	oses	2,956.
13 (See Par Lin	t XV-B e No.	Add line eet in lin	12, columns (b), (d), and (e) e 13 instructions to verify calculation	ons.) Accompli	shment of Exemp	ot Purpe	oses	2,956.
13 (See Par Lin	Total. A workshe	Add line eet in lin	12, columns (b), (d), and (e)e 13 instructions to verify calculations to the ationship of Activities to the	ons.) Accompli	shment of Exemp	ot Purpe	oses	2,956.
13 (See Par Lin	t XV-B e No.	Add line eet in lin	12, columns (b), (d), and (e)e 13 instructions to verify calculations to the ationship of Activities to the	ons.) Accompli	shment of Exemp	ot Purpe	oses	2,956.
13 (See Par Lin	t XV-B e No.	Add line eet in lin	12, columns (b), (d), and (e)e 13 instructions to verify calculations to the ationship of Activities to the	ons.) Accompli	shment of Exemp	ot Purpe	oses	2,956.
13 (See Par Lin	t XV-B e No.	Add line eet in lin	12, columns (b), (d), and (e)e 13 instructions to verify calculations to the ationship of Activities to the	ons.) Accompli	shment of Exemp	ot Purpe	oses	2,956.
13 (See Par Lin	t XV-B e No.	Add line eet in lin	12, columns (b), (d), and (e)e 13 instructions to verify calculations to the ationship of Activities to the	ons.) Accompli	shment of Exemp	ot Purpe	oses	2,956.
13 (See Par Lin	t XV-B e No.	Add line eet in lin	12, columns (b), (d), and (e)e 13 instructions to verify calculations to the ationship of Activities to the	ons.) Accompli	shment of Exemp	ot Purpe	oses	2,956.
13 (See Par Lin	t XV-B e No.	Add line eet in lin	12, columns (b), (d), and (e)e 13 instructions to verify calculations to the ationship of Activities to the	ons.) Accompli	shment of Exemp	ot Purpe	oses	2,956.
13 (See Par Lin	t XV-B e No.	Add line eet in lin	12, columns (b), (d), and (e)e 13 instructions to verify calculations to the ationship of Activities to the	ons.) Accompli	shment of Exemp	ot Purpe	oses	2,956.
13 (See Par Lin	Total. A workshe t XV-B e No.	Add line eet in lin	12, columns (b), (d), and (e)e 13 instructions to verify calculations to the ationship of Activities to the	ons.) Accompli	shment of Exemp	ot Purpe	oses	2,956.
13 (See Par Lin	Total. A workshe t XV-B e No.	Add line eet in lin	12, columns (b), (d), and (e)e 13 instructions to verify calculations to the ationship of Activities to the	ons.) Accompli	shment of Exemp	ot Purpe	oses	2,956.
13 (See Par Lin	Total. A workshe t XV-B e No.	Add line eet in lin	12, columns (b), (d), and (e)e 13 instructions to verify calculations to the ationship of Activities to the	ons.) Accompli	shment of Exemp	ot Purpe	oses	2,956.
13 (See Par Lin	Total. A workshe t XV-B e No.	Add line eet in lin	12, columns (b), (d), and (e)e 13 instructions to verify calculations to the ationship of Activities to the	ons.) Accompli	shment of Exemp	ot Purpe	oses	2,956.
13 (See Par Lin	Total. A workshe t XV-B e No.	Add line eet in lin	12, columns (b), (d), and (e)e 13 instructions to verify calculations to the ationship of Activities to the	ons.) Accompli	shment of Exemp	ot Purpe	oses	2,956.
13 (See Par Lin	Total. A workshe t XV-B e No.	Add line eet in lin	12, columns (b), (d), and (e)e 13 instructions to verify calculations to the ationship of Activities to the	ons.) Accompli	shment of Exemp	ot Purpe	oses	2,956.
13 (See Par Lin	Total. A workshe t XV-B e No.	Add line eet in lin	12, columns (b), (d), and (e)e 13 instructions to verify calculations to the ationship of Activities to the	ons.) Accompli	shment of Exemp	ot Purpe	oses	2,956.
13 (See Par Lin	Total. A workshe t XV-B e No.	Add line eet in lin	12, columns (b), (d), and (e)e 13 instructions to verify calculations to the ationship of Activities to the	ons.) Accompli	shment of Exemp	ot Purpe	oses	2,956.
13 (See Par Lin	Total. A workshe t XV-B e No.	Add line eet in lin	12, columns (b), (d), and (e)e 13 instructions to verify calculations to the ationship of Activities to the	ons.) Accompli	shment of Exemp	ot Purpe	oses	2,956.
13 (See Par Lin	Total. A workshe t XV-B e No.	Add line eet in lin	12, columns (b), (d), and (e)e 13 instructions to verify calculations to the ationship of Activities to the	ons.) Accompli	shment of Exemp	ot Purpe	oses	2,956.
13 (See Par Lin	Total. A workshe t XV-B e No.	Add line eet in lin	12, columns (b), (d), and (e)e 13 instructions to verify calculations to the ationship of Activities to the	ons.) Accompli	shment of Exemp	ot Purpe	oses	2,956.
13 (See Par Lin	Total. A workshe t XV-B e No.	Add line eet in lin	12, columns (b), (d), and (e)e 13 instructions to verify calculations to the ationship of Activities to the	ons.) Accompli	shment of Exemp	ot Purpe	oses	2,956.
13 (See Par Lin	Total. A workshe t XV-B e No.	Add line eet in lin	12, columns (b), (d), and (e)e 13 instructions to verify calculations to the ationship of Activities to the	ons.) Accompli	shment of Exemp	ot Purpe	oses	2,956.
13 (See Par Lin	Total. A workshe t XV-B e No.	Add line eet in lin	12, columns (b), (d), and (e)e 13 instructions to verify calculations to the ationship of Activities to the	ons.) Accompli	shment of Exemp	ot Purpe	oses	2,956.
13 (See Par Lin	Total. A workshe t XV-B e No.	Add line eet in lin	12, columns (b), (d), and (e)e 13 instructions to verify calculations to the ationship of Activities to the	ons.) Accompli	shment of Exemp	ot Purpe	oses	2,956.
13 (See Par Lin	Total. A workshe t XV-B e No.	Add line eet in lin	12, columns (b), (d), and (e)e 13 instructions to verify calculations to the ationship of Activities to the	ons.) Accompli	shment of Exemp	ot Purpe	oses	2,956.

Part XVI Information Regarding Transfers to and Transactions and Relationships With Noncharitable Exempt Organizations

1 0	مطلحامنا	i_		in any of the fallowing with				Yes	No
d	escribe	organization directed in section 501(to political organi	c) (other than section 5	e in any of the following wit 501(c)(3) organizations) or i	n any other organization section 527,	n			
	_			ncharitable exempt organiza	ation of:				
		•	-				1a (1)		Х
							1a (2)		Х
	•	ansactions:							
(1	I) Sale	es of assets to a r	noncharitable exempt o	rganization			1b(1)		Х
(2	2) Purd	chases of assets t	from a noncharitable e	xempt organization			1b(2)		Х
(3	3) Ren	tal of facilities, ed	quipment, or other asse	ets			1b (3)		Χ
(4	1) Reir	nbursement arrar	ngements				1b (4)		Χ
(5	5) Loar	ns or Ioan guaran	itees				1b (5)		X
(6	6) Perf	formance of service	ces or membership or	fundraising solicitations			1b (6)		X
c S	haring	of facilities, equip	pment, mailing lists, ot	her assets, or paid employe	ees		1c		X
a	ny tran	saction or sharing	g arrangement, show in	e the following schedule. Colu porting foundation. If the foun n column (d) the value of th	e goods, other assets,	or services receive	d.		
(a) Line	e no.	(b) Amount involved	d (c) Name of nonc	naritable exempt organization	(d) Description of tra	nsfers, transactions, and	sharing arrai	ngemen	ts
N/A									
-									
-									
		undation directly or ed in section 501(complete the follow		or related to, one or more ta 501(c)(3)) or in section 527	x-exempt organizations?		. Yes	X	No
		Name of organiz	•	(b) Type of organization	(6	c) Description of rela	tionship		
N/A		,			,	· · · · · · · · · · · · · · · · · · ·	•		
	Under p	enalties of perjury, I de	eclare that I have examined this	s return, including accompanying sch	nedules and statements, and to	the best of my knowledge	and belief, i	t is true	,
Sign	correct,	and complete. Declara	ation of preparer (other than ta.	cpayer) is based on all information o	Willer preparer has any knov	vicage.	May the this retur	IRS disc	uss
Here				1	President		this retur preparer See instr	n with th shown b	ne below?
	Signa	ture of officer or trustee	<u> </u>	Date	Title			Yes	No
		Print/Type preparer's		Preparer's signature	Date	Check if	PTIN	163	NO
Paid		JAKE NEIL		JAKE NEIL		self-employed	P00837	7434	
Prepa	rer	Firm's name	Neil and Comp	•		, ' ' '	701345	1774	
Use C		Firm's name Firm's address	1184 N 15th S			OT _ T	101343		
03C C	, iiiy	5 4341655		9715		Phone no. 406-	587-92	39	
BAA		1	2020maily Fit 5			100	Form 99		(2023)
								- '	·/

	deral Staten BREG FOUNDAT ZEMAN DUCKIE	ΓΙΟΝ		Page 1 88-1524136
Statement 1 Form 990-PF, Part I, Line 11 Other Income				
		(a) Revenue ber Books	(b) Net Investment Income	(c) Adjusted Net Income
Income From Special Events	\$ Total <u>\$</u>	7,523. 7,523.	<u> </u>	3 0.
Statement 2 Form 990-PF, Part I, Line 16b Accounting Fees				
ACCOUNTING FEESTotal	\$ 846.		Adjusted Net Income	(d) Charitable Purposes \$ 0.
Statement 3 Form 990-PF, Part I, Line 23 Other Expenses				
ADVERTISINGLICENSESSpecial Event Expenses	(a) Expenses per Books \$ 101. 20. 4,567.	(b) Net Investment Income	(c) Adjusted <u>Net Income</u>	(d) Charitable <u>Purposes</u>
WEBSITE Total	456.	\$ 0	. \$ 0.	\$ 0.